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SEC 1972

(6/99)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form

displays a currently valid OMB control number.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of J JI the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2002

Estimated average burden

hours per response...1

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

**UNITED STATES** 

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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SEC USE ON	VLY	
Prefix	Serial	
DATE RECEI	VED	

	1						
Name of Offering (check if this is an amendment and name has changed, and indicate change.)  Series D Convertible Preferred Stock Offering							
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [	] ULO						
Type of Filing: [X] New Filing [ ] Amendment							
A. BASIC IDENTIFICATION DATA	•						
Enter the information requested about the issuer	ı						
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)  Electric City Corp.	1						

Address of Executive Offices Telephone Number (Includin	(Number and Street, City, State o Area Code)	e, Zip Code)
1280 Landmeier Road, Elk (	,	(847) 437-1666
Address of Principal Business Telephone Number (Including (if different from Executive Of	•	city, State, Zip Code)
Brief Description of Business Manufacture and sale of en	ergy management systems	
Type of Business Organization	n	
[X] corporation	[ ] limited partnership, already	formed [ ] other (please specify):
[ ] business trust	[ ] limited partnership, to be for	med
	Montl	h Year
	ncorporation or Organization: [0]5] r Organization: (Enter two-letter U.S. CN for Canada; FN for ot	Postal Service abbreviation for State:

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form.

Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[ ] Promoter [	] Beneficial Owner	[X] Executive Officer	[X] Director [ ]	General and/or Managing Partner
Full Name (Last nam Mitola, John P.	ne first, if individua	al)			- The second sec
Business or Resider 1280 Landmeier Ro	•		et, City, State, Zip Code 60007	9)	
Check Box(es) that Apply:	[ ] Promoter [	] Beneficial Owner	[X] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam Mistarz, Jeffrey R.	ne first, if individua	al)			
Business or Resider 1280 Landmeier Ro			et, City, State, Zip Code 60007	9)	aan and an ann an an ann an ann an ann an
Check Box(es) that Apply:	[ ] Promoter [	] Beneficial Owner	[ ] Executive Officer	[X] Director [ ]	General and/or Managing Partner
Full Name (Last nam Stelter, Michael S.	ne first, if individu	at)			
Business or Resider 335 Meadow Lake I			et, City, State, Zip Code	9)	

Check Box(es) that Apply:	[] Promoter [	] Beneficial Owner	[]	Executive Officer	[X]	Director [	-	General and/or Managing Partner
Full Name (Last nam Manning, Robert J.	e first, if individua	al)						Constitution of Constitution o
Business or Residen 11232 Chesapeake				State, Zip Code)				
Check Box(es) that Apply:	[ ] Promoter [	] Beneficial Owner	[]	Executive Officer	[ <b>X</b> ]	Director [	•	General and/or Managing Partner
Full Name (Last nam Asplund, David R.	e first, if individua	al)						Contraction of Contraction Contraction
Business or Residen Delano Group Secu						IL 60604		
Check Box(es) that Apply:	[] Promoter [X	(] Beneficial Owner	[]	Executive Officer	[X]	Director [	_	General and/or Managing Partner
Full Name (Last nam McEneely, Kevin P.		al)						encommon materials access
Business or Residen North 1947 Linn Ro			City,	State, Zip Code)				
Check Box(es) that Apply:	[ ] Promoter [	] Beneficial Owner	[ ]	Executive Officer	[X]	Director [	-	General and/or Managing Partner
Full Name (Last nam Pientka, Gerald A.	ne first, if individua	al)						
Business or Residen 315 West Cuttriss,			City,	State, Zip Code)	1			
Check Box(es) that Apply:	[ ] Promoter [	] Beneficial Owner	[]	Executive Officer	[X]	Director [	_	General and/or Managing Partner
Full Name (Last nam Brace, Frederic F.	ne first, if individua	al)						Angel and the second
Business or Resider UAL Corp., 1200 E.					)			

•

Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[ ] Executive Officer	e [X]	Director	[]	General and/or Managing Partner
Full Name (Last nam Wagner, Robert D.	e first, if individual	)					
Business or Residen 638 Lindero Canyo				Code)			
Check Box(es) that Apply:	[ ] Promoter [X]	Beneficial Owner	[ ] Executiv Officer	e []	Director	[]	General and/or Managing Partner
Full Name (Last nam DYDX Consulting L		)				***************************************	
Business or Residen 221 N. LaSalle Stre				Code)			
Check Box(es) that Apply:	[ ] Promoter [X]	Beneficial Owner	[ ] Executiv Officer	e []	Director	[]	General and/or Managing Partner
Full Name (Last nam	e first, if individual	)					to commence the commence of th
Business or Residen c/o Kevin McEneely,							
Check Box(es) that Apply:	[ ] Promoter [X]	Beneficial Owner	[ ] Executiv Officer	re []	Director	[]	General and/or Managing Partner
Full Name (Last nam Pino Manufacturing		)					A CONTRACTOR AND A CONT
Business or Resident c/o Joseph Marino,							
Check Box(es) that Apply:	[ ] Promoter [X]	Beneficial Owner	[ ] Executiv Officer	re []	Director	[]	General and/or Managing Partner
Full Name (Last nam Joseph P. Marino	ne first, if individual	)					
Business or Residen 49 Marguerite Drive				c Code)			,

Check Box(es) that Apply:	[ ] Promoter [X]	Beneficial Owner	[ ] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam Victor Conant	e first, if individual	)	The second secon		TOTAL CONTROL OF THE
Business or Resider Nightingale-Conan				:)	20 cm and and an
Check Box(es) that Apply:	[ ] Promoter [X]	Beneficial Owner	[ ] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam Nikolas Konstant	e first, if individua	1)			
Business or Resider 221 N. LaSalle Str	•		•	)	
Check Box(es) that Apply:	[ ] Promoter [X]	Beneficial Owner	[ ] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam Newcourt Capital U		)			
Business or Resider 1211 Avenue of the	ice Address (Numl Americas, 22 <sup>nd</sup> F	ber and Street, Cloor, New York	City, State, Zip Code , NY 10036	2)	
Check Box(es) that Apply:	[ ] Promoter [X]	Beneficial Owner	[ ] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam Richard Kiphart	ne first, if individua	l)	A		
Business or Resider Wm. Blair & Compa				·)	

			E	B. INFO	RMATIC	ON ABO	UT OFF	ERING			<u></u>	
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  [							′es No ][X]					
			Ansv	ver also	in Appe	endix, Co	olumn 2,	if filing (	under ULO	E.		
2. Wha	t is the	minimu	m invest	ment th	at will b	e accep	ted from	any indi	vidual?	•••••	•	\$20,000
3. Does the offering permit joint ownership of a single unit?							es No					
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
			first, if i		al)							
				•	nber and		City, St	ate, Zip	Code)			
Name	of Asso	ciated E	roker o	r Dealer								
							ls to Soli	icit Purcl	nasers	[ ]	] All Sta	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] X	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH] <b>X</b>	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI] <b>X</b>	[WY]	[PR]

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt ..... Equity (Preferred Stock, Common Stock & Warrants for Preferred 1,500,000 \$ 1,500,000 and Common)..... [X] Preferred [X] Common Convertible Securities (including warrants) ..... Partnership Interests ..... \$ Other (Specify\_\_\_\_\_). Total ..... 1,500,000 \$ 1,500,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number **Dollar Amount** Investors of Purchases \$ 1,500,000 Accredited Investors ..... 5 Non-accredited Investors ..... Total (for filings under Rule 504 only) ..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering

Rule 504 .....

Total .....

**Dollar Amount** 

\_\_\$\_\_\_\_

Sold

\$

Type of Security

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]\$
Printing and Engraving Costs	[]\$
Legal Fees	[X] \$ <u>10,000</u>
Accounting Fees	[]\$
Engineering Fees	[]\$
Sales Commissions (specify finders' fees separately)	[]\$120,000
Other Expenses (identify) Escrow Agent Fees	[ ] \$ <u>1,500</u>
Total	[]\$131,500

Daymente to

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." ...........

1,368,500

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[]	[X] \$ <u>11,500</u>
Purchase of real estate	[]\$	[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[]\$
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	_[]\$
Repayment of indebtedness	[]\$	[]\$
Working capital	[]\$	[X] \$ <u>1,368,500</u>
Other (specify): Placement Agent Fees	[]\$ 120,000	<u>0</u> []\$
	[]\$	[]\$
Column Totals	[]\$ 120,000	[]\$ <u>1,380,000</u>
Total Payments Listed (column totals added)	[]\$	1,500,000

## D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature ,	Date
Electric City Corp.	9////	7/8/03
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Jeffrey R. Mistarz	Chief Financial Officer & Treasurer	

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE	
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes No
See Appendix, Column 5, for state response.	

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date				
Electric City Corp.	4//// 17/8/03				
Name of Signer (Print or Type)	Title (Print of Type)				
Jeffrey R. Mistarz	Chief Financial Officer & Treasurer				

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# **APPENDIX**

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	Inten se to no accred inves in St (Part	ll on- dited tors ate t B-	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors		Number of Non- Accredited Investors		Yes	No
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IL		X	Series D convertible preferred stock, common stock, warrants to series D convertible preferred stock and warrants to purchase common stock for an aggregate purchase price of \$600,000	3	600,000	0	0		Х
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OH	X	Series D convertible preferred stock, common stock, warrants to series D convertible preferred stock and warrants to purchase common stock for an aggregate purchase price of \$600,000	1	600,000	0	0	X
ОК							
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SD		A SAME AND					
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VA							
WA							
WV						***************************************	
WI	X	Series D convertible	1	300,000	0	0	X

	preferred stock, common stock, warrants to series D convertible preferred stock and warrants to purchase common stock for an aggregate purchase price of \$300,000		
WY			
PR			